SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58

Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT **BAYFIELD COUNTY, WISCONSIN**

Date Stamp (Received)

	Permit #:	19-0174
ENTER	Date:	6-13-19
	Amount Paid:	\$75 5.30-19
	Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCT	ON UNTIL	ALL PERMITS H	HAVE BEEN ISSUED	TO APP	LICANT.		FILL OL	II NI T	NK (<mark>NO F</mark>	PENCIL)	
TYPE OF PERMIT REQUE	STED→	► 💆 LANI	D USE SA	NITAR		CONDITIONA		USE	☐ B.O.	A. 🗆	ОТНІ	R
Owner's Name:	5 1/	1-			ng Address:		/State/Zip:			Teleph	one:	
Joseph H.	K. 140	okans		86	275 Bark	River 1	terbster, w	7 5	4844	_	_	
Address of Property:			_	City/	State/Zip:					Cell Ph		0000
			7		7					715-562-008		
Contractor:		1	1	Conti	ractor Phone:	Plumber:				Plumbe	er Phon	ie:
Authorized Agent: (Person S	igning Appl	ication on behal	f of Owner(s))	Agen	t Phone:	Agent Mailing Ad	Idress (include City/Stat	e/Zip):		Writte	n Autho	orization
				-				, , , ,		Attach	ed	
PROJECT .				Tax II	D#,_			Rec	orded Docu	☐ Yes ument: (S		
LOCATION	al Descrip	otion: (Use T	ax Statement)		11563			_	879	<u></u>	-	442
W1/2 1/4, W/2	4/0	Gov't Lot	Lot(s)	CSM		1 Doc # Lot(s) No. Block(s) No.	Sub	division:			
<u> </u>	-1/4				879							
Section, To	wnshin	50 N.R	lange 07 v	Λ/	Town of:		•		Size	Acre	age	
, , ,					CLOVER			,	10	/	0	
	s Propert	y/Land withi	n 300 feet of Riv	er, Stre	eam (incl. Intermittent)	Distance Stru	cture is from Shorelin	ne:	Is Pro	perty in	Δr	e Wetland
☐ Shoreland →	eek or Lar	ndward side o	of Floodplain?	If y	rescontinue>			feet	and the same	ain Zone?		Present?
	s Propert	y/Land within	n 1000 feet of La			Distance Stru	cture is from Shorelin			Yes No		Yes
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⋈ Non-Shoreland												
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* include donated time &	Proje	:Ct	# of Storie	es	Foundation	in			ary Syster roperty?	n		on
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	ew Cons				Basement		☐ Municipal/City					☐ City
1 S	onversio	Alteration	☐ 1-Story +	Loft	Foundation	□ 2	☐ (New) Sanitary					Wel
		existing bldg)	☐ 2-Story		V Piers	□ 3	□ Sanitary (Exists) Specify Type: □ □ Privy (Pit) or □ Vaulted (min 200 gallon) □					
	ın a Busi				Use	⊠ None	□ Portable (w/ser		11 200 ga	ilottj		
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<u> </u>	Shed						№ None					
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he box below: Draw or Sketch your Property (regardless of what you are applying for)

Fill Out in Ink - NO PENCIL

Show Location of: **Proposed Construction** (2)Show / Indicate:

North (N) on Plot Plan (3)Show Location of (*):

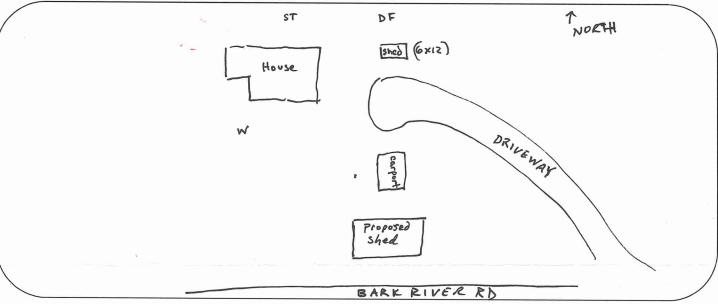
(*) Driveway and (*) Frontage Road (Name Frontage Road) (4)Show: All Existing Structures on your Property

Show:

(5) (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)

Show any (*): (6)(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond

(7) Show any (*): (*) Wetlands; or (*) Slopes over 20%



Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurem	nent	Description	Measur	ement
Setback from the Centerline of Platted Road	120	Feet	Setback from the Lake (ordinary high-water mark)		Feet
Setback from the Established Right-of-Way	I	Feet	Setback from the River, Stream, Creek	_	Feet
			Setback from the Bank or Bluff	_	Feet
Setback from the North Lot Line	> 1000	Feet		- 8	
Setback from the South Lot Line	7 200	Feet	Setback from Wetland	-	Feet
Setback from the West Lot Line	150	Feet	20% Slope Area on the property	☐ Yes	■ No
Setback from the East Lot Line	80	Feet	Elevation of Floodplain	, _	Feet
Setback to Septic Tank or Holding Tank	120	Feet	Setback to Well	80	Feet
Setback to Drain Field	120	Feet			
Setback to Privy (Portable, Composting)		Feet			

Prior to the placement or construction of a structure within ten (10) feet of the minimum re other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number: 8	413	# of bedrooms: 2	Sanitary Date: 10 - 22 - 74						
Permit Denied (Date):	Reason for Denial:									
Permit #: 19-0174	Permit Date: 6-13	vate: 6-13-19								
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Record	ous Lot(s)) No	Mitigation Required Mitigation Attached	☐ Yes ☐ No ☐ Yes ☐ No	Affidavit Required						
Granted by Variance (B.O.A.) ☐ Yes No Case #:	/ Variance (B.O.A.)	ase #:								
Was Proposed Building Site Delineated Yes No		Were Property Lines Represented by Owner Was Property Surveyed Yes Ves								
los gett and had been expanded:			riginally under	Zoning District (A61) Lakes Classification ()						
Date of Inspection: 6/7/19	Inspected by: Toda	l Norwood		Date of Re-Inspection:						
Condition(s): Town, Committee or Board Conditions Attac	ched? Yes	not be used for								
Signature of Inspector: Todd Norwood				Date of Approval:						
Hold For Sanitary: Hold For TBA:	Hold For Affic	davit: 🗆	Hold For Fees: 🗌							

wn, City, Village, State or Federal Permits May Also Be Required

LAND USE - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	19-0174 Issued To:						Joseph & Laura Hokanson								
W ½ W ½ Location:		1/4	of	SE	1/4	Section	11	Township	50	N.	Range	7	W.	Town of	Clover
Gov't Lot			L	.ot		Blo	ck	Sul	odivisio	n				CSM#	

For: Residential Accessory Structure: [1- Story; Shed (12' x 20') = 240 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): May not be used for human habitation. No water under pressure in structure.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Todd Norwood

Authorized Issuing Official

June 13, 2019

Date

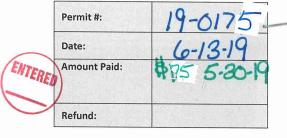
SUBMIT: COMPLETED APPLICATION, TAX
STATEMENT AND FEE TO:
Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891

(715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN



Bayfield Co. Zoning Dept.



INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONS					то арр	LICANT.				FILL OUT	IN IN	к (<mark>NO P</mark>	ENCIL)			
TYPE OF PERMIT F	REQUES	TED-	✓ LANI	D USE SA	NITAR	Y PRIVY	□ CONDITI	ONA	L USE	SPECIAL		□ B.O.		OTHE	R	
Owner's Name:		1 14				ng Address:		City/	State/Zip:		51	1844	Telepho			
Joseph	HIC	HOK	anson	-	80	6275 Ba	-le Guer	-	Herbs.	fer h)(_			
Address of Property	:			A1		State/Zip:			,,,,				Cell Pho	ne:		
						1							715	00	99	,
Contractor:			1	n	Cont	ractor Phone:	Plumber:				Plumber Phone:					
Authorized Agent: (Derson Sig	ning Appli	ication on hobal	f of Owner(s)	Agon	t Phone:	Agent Meilin	 Ad	dress (include	C:+ . /C+-+-	/ 7: \					
Addionized Agents (r craori aig	ung Appi	cation on benai	i oi owner(s))	Agen	Trione.	Agent Main	iig Au	uress (include	city/state	e/Zip): Written Autho Attached				rızatı	on
BROKE WITH THE COMMO	1				Tax I	Tax ID#					Paca	rded Docu	☐ Yes			uabia)
PROJECT LOCATION	Legal	Descrip	tion: (Use T	ax Statement)	Ida	11563					Neco	879			42	
W/2 1/4, h	1/2	1/4	Gov't Lot	Lot(s)	CSM		SM Doc#	Lot(s	s) No. Blo	ck(s) No.	Subd	ivision:				
				27		Town of:					Lot S	ize	Acrea	ge.		
Section	, Tov	vnship <u> </u>	N, R	tange 07	W	CLOI	VER				2010		//	_		
	□ Is	Property	y/Land withi	n 300 feet of Riv	er, Stre	eam (incl. Intermittent		Stru	cture is fron	n Shoreline	:				10	
□ Charaland	Cree			of Floodplain?		escontinue		Jau			eet	Is Prop Floodpla	erty in in Zone?		Wet Prese	tlands ent?
□ Shoreland →	☐ Is	Property	//Land withi	n 1000 feet of La		nd or Flowage		Stru	cture is fron				⁄es		□ Ye	es
										1	eet		No		□ N	10
Non-Shoreland																
Value at Time							Total#	of					7			
of Completion		Proje	1.05	# of Stori		hedrooms					at Ty					pe of
* include donated time &		Proje	CL	# OI Stori	es	Foundation in Sewer/S						ry Systen operty?	n			on
material						structure						sperty.			pro	perty
			truction	1-Story		□ Basement □ 1 □ Municipal/City Loft □ Foundation □ 2 □ (New) Sanitary										City
\$ 1,000		nversio:	Alteration	☐ 1-Story + ☐ 2-Story	21											Well
			existing bldg)			Sanitary (Exists) Specify Privy (Pit) or Vaulte										
Y			ness on			Use	₩ Non	e		le (w/serv			200 6411	5117		
: 36		perty				☐ Year Round	b		☐ Compo	ost Toilet						
	P						_		₩ None							
Existing Structure	e: (if pe	rmit bei	ng applied fo	r is relevant to i	t)	Length: 120	000 20	ס ⁻	Width:	12"		He	ight:	12	-	
Proposed Constr	uction:					Length:	20-		Width:	10	-	He	ight:	12		
Proposed Us	•	1				Duomagad Church								S	quar	re
Proposed os	Е					Proposed Struct	Medical Marketing				D	imension	ıs		otag	
						cture on property	y)				(X)			
			Residence	e (i.e. cabin, hu	unting	silack, etc.)					1	X)			
Residential	Use			with a Porc	:h						(X)			
				with (2 nd) P	orch						(Х)			
				with a Decl							(Х)			
☐ mercial	Hee			with (2 nd) D							(X)			
merciai	OSE		DL.I	with Attach					No.	442 27 27	(X)			
						sleeping quarte					(X)	1 1		
						ate)					1	X)			
☐ Municipal U	se			y Building (s							1	X)			
		9				Alteration (speci	fy) S/	heo	l addit	7000	(10	- ^ - Z	01	2	00	<u> </u>
						157301	.,							-	7	
			Special U	se: (explain)							(Х)			
	Conditional Use: (explain)										(Х)			
				rplain)							(Х)			
I (we) declare that this a	pplication ((including a	iny accompanying	g information) has be-	en examir	TING CONSTRUCTION	e best of my (our)	knowle	edge and belief it	is true correc	t and co	molete Llura	a) acknowles	lge that	l (wa) -	am
(are) responsible for the	detail and relying or	accuracy of this inform	f all information I mation I (we) am	l (we) am (are) provid (are) providing in or	ing and th	nat it will be relied upon l application. I (we) conse	by Bayfield Count	v in de	termining wheth	er to issue a n	ermit 1	we) further a	ccent liabilit	v which	may h	20.2
	, 6 51		se of inspection.				ocurry offich	crid	. See with autilini	c. mg count	orunial	io nave a	ccess to the	anove	-escrib	Jeu

Owner(s): (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Date 5-27-19

Authorized Agent:

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Attach

Address to send permit ______ 86275

75 Bark River R

Rd Herbstor- rul

Copy of Tax Statement

Date

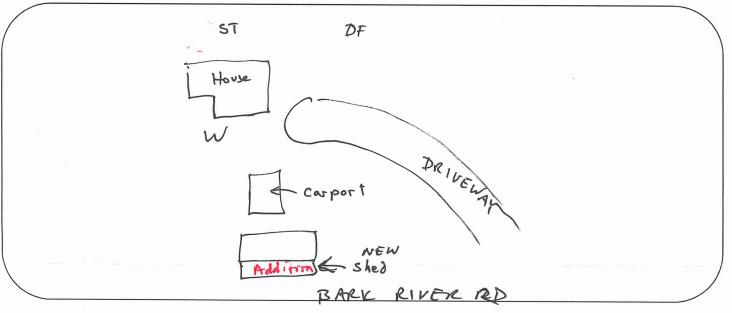
the box below: Draw or Sketch your Property (regardless of what you are applying for) Fill Out in Ink - NO PENCIL Show Location of: **Proposed Construction** (2)Show / Indicate: North (N) on Plot Plan (3)Show Location of (*):

(*) Driveway and (*) Frontage Road (Name Frontage Road) (4)Show: All Existing Structures on your Property

(5) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (6)

Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond

(7) Show any (*): (*) Wetlands; or (*) Slopes over 20%



Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measureme	nt		Description	Measure	ement
Setback from the Centerline of Platted Road	120	Feet		Setback from the Lake (ordinary high-water mark)		Feet
Setback from the Established Right-of-Way		Feet	And an orange of	Setback from the River, Stream, Creek	_	Feet
				Setback from the Bank or Bluff	_	Feet
Setback from the North Lot Line	7 1000	Feet				
Setback from the South Lot Line	> 200	Feet		Setback from Wetland		Feet
Setback from the West Lot Line	150	Feet		20% Slope Area on the property	□ Yes	٩No
Setback from the East Lot Line	βo	Feet		Elevation of Floodplain	_	Feet
Setback to Septic Tank or Holding Tank	120	Feet		Setback to Well	80	Feet
Setback to Drain Field	120	Feet				
Setback to Privy (Portable, Composting)		Feet	Eso			

to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be one previously surveyed corner to the other previously marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult.

to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:	8413	# of bedrooms: 2	Sanitary Date:	0-22-74				
Permit Denied (Date):	Reason for Denial:								
Permit #: 19-0175	Permit Date: 6-13	3-19							
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Recondance Yes (Fused/Contigue Yes Yes	ous Lot(s))	Mitigation Required Mitigation Attached	Yes No	Affidavit Required Affidavit Attached	□ Yes □ No □ No				
Granted by Variance (B.O.A.) □ Yes □ No Case #:		Previously Granted b	y Variance (B.O.A.)	e #:					
Was Proposed Building Site Delineated Yes No	MARKET AND REPORTED THE RESERVE OF THE PARKET.	Were Property Lines Represented by Owner Was Property Surveyed Wes No No							
Inspection Record: Existing Shed With Appeals Code on	in proposed as	ldition on rul on-site @	South side,	Zoning District Lakes Classification	(A61)				
Date of Inspection: 47/11	Inspected by:	ld Norwood Date of Re-Inspection:							
Condition(s): Town, Committee or Board Conditions Attac	ched?		* **						
	habitatio	t be used for hu on. No water un e in structure.	man der						
Signature of Inspector: Toold Newwood				Date of Approx	val: 6/11/19				
Hold For Sanitary: Hold For TBA: Hold For TBA:	Hold For Affic	davit: 🗌	Hold For Fees:						

own, City, Village, State or Federal Permits May Also Be Required

LAND USE - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	19-0	175)	I	ssue	d To: Jo	seph	& Laura Ho	kans	on					
N ½ W ½ of															
Location:	NW	1/4	of	SE	1/4	Section	11	Township	50	N.	Range	7	W.	Town of	Clover
Gov't Lot			L	.ot		Blo	ck	Sul	odivisio	on				CSM#	

For: Residential Accessory Structure Addition: [1- Story; Shed Addition (10' x 20') = 200 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): May not be used for human habitation. No water under pressure in structure.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Todd Norwood

Authorized Issuing Official

June 13, 2019

Date